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PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application or Docket Number 10/568,199			ing Date 10/2006	To be Mailed
APPLICATION AS FILED - PART I (Column 1) (Column 2)								OTHER THAN SMALL ENTITY ☑ OR SMALL ENTITY				
FOR NUMBER FILED					NUMBER EXTRA			RATE (\$)	FEE (\$)		RATE (\$)	FEE (\$)
	BASIC FEE (37 CFR 1.16(a), (b), (c)	or (c))	N/A		N/A		1	N/A		1	N/A	
	SEARCH FEE (37 CFR 1.16(k), (i), o		N/A		N/A		1	N/A			N/A	
	EXAMINATION FE (37 CFR 1.16(o), (p),		N/A		N/A			N/A			N/A	
	TAL CLAIMS CFR 1.16(i))		minus 20 =		*			X \$ =		OR	X \$ =	
IND	EPENDENT CLAIM CFR 1.16(h))	S		ninus 3 =	*			X \$ =			X \$ =	
	APPLICATION SIZE (37 CFR 1.16(s))	FEE	If the specification and drawir sheets of paper, the applicati is \$250 (\$125 for small entity additional 50 sheets or fractic 35 U.S.C. 41(a)(1)(G) and 37			n size fee due for each n thereof. See						
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))												
* If the difference in column 1 is less than zero, enter "0" in column 2.								TOTAL			TOTAL	
APPLICATION AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)								OTHER THAN SMALL ENTITY OR SMALL ENTITY				
AMENDMENT	03/31/2010	CLAIMS REMAININ AFTER AMENDME		HIGHEST NUMBER PREVIOUSLY PAID FOR		PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	* 13	Minus	** 20		= 0		X \$26 =	0	OR	X \$ =	
	Independent (37 CFR 1.16(h))	* 2	Minus	***3		= 0		X \$110 =	0	OR	X \$ =	
	Application Size Fee (37 CFR 1.16(s))											
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE	0	OR	TOTAL ADD'L FEE	
		(Column	,	(Coli	umn 2)	(Column 3)						
AMENDMENT	02/07/2011	CLAIMS REMAINII AFTEF AMENDME	NG l	NUI PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)
	Total (37 CFR 1.16(i))	* 13	Minus	** 20		=		X \$ =		OR	X \$ =	
	Independent (37 CFR 1.16(h))	* 2	Minus	*** 3		==		X \$ =		OR	X \$ =	
	Application Size Fee (37 CFR 1.16(s))						]					
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									OR		
								TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".  *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												

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